

**CITY OF LONG BEACH, MISSISSIPPI
APPLICATION FOR CASE REVIEW**

PHYSICAL ADDRESS:
201 JEFF DAVIS AVENUE
LONG BEACH, MS 39560

**PHONE: (228) 863-1554
FAX: (228) 863-1558**

MAILING ADDRESS
POST OFFICE BOX 929
LONG BEACH, MS 39560

- I. TYPE OF CASE: _____ PLANNING COMMISSION APPROVAL
 _____ DECISION OF THE BUILDING OFFICIAL IS ALLEGED TO BE IN ERROR
 _____ INTERPRETATION OF THE ZONING ORDINANCE

II. Address of Property Involved: _____
Tax Parcel Number

III. Statement clearly explaining the request being made for case review. (Attach supplemental pages if necessary.) _____

IV. REQUIRED ATTACHMENTS:

- A. **Interest and Ownership.** The applicant's name, address and interest of every person, firm or corporation represented by the applicant in the application, the name of the owner or owners and their respective addresses of the entire land area proposed to be changed in classification or to be included within the structures then existing thereon, and sufficient evidence to establish that the applicant has the right of possession to the land area and structures, the names and address of all owners of adjacent property (exclusive of the width of intervening streets, alleys, or bodies of water). Claims of support or "no objection" from owners of adjoining property should be substantiated in writing or by the appearance of such owner(s) at the hearing. Such support is usually considered material but not conclusive.
- B. **Survey and/or Site Plan.** A site plan showing the land area which would be affected, if required a general layout drawing of the development, easements bounding and intersecting the designated area, the locations of existing and proposed structures with supporting open facilities, and the ground area to be provided and continuously maintained for the proposed structure or structures;
- C. **Recorded Warranty Deed.** A deed which includes a legal description of the specific piece of property involved in the request. If, several parcels are included in a request, individual parcel deeds AND a composite legal description of all parcels involved in the request must be provided.
- D. **Fee.** Attach a check in the amount of \$50.00. This check should be made payable to the City of Long Beach to cover administrative cost. You will also be responsible to actual costs, such as advertising and mailing incurred with the processing of your application.

*****NOTE*** APPLICATION WILL NOT BE ACCEPTED WITHOUT THE ABOVE LISTED DOCUMENTS.**

V. OWNERSHIP AND CERTIFICATION:

READ BEFORE EXECUTING, Attendance by the applicant(s) at the public hearing (IF REQUIRED) and/or meeting is mandatory; however, the applicant may designate a representative to attend the public hearing and/or meeting on their behalf, provided said representative has been properly designated to speak on the applicant's behalf either by written permission or oral designation by the applicant. If a continuance is to be granted, the applicant must request same in writing a minimum of seven (7) days in advance of the scheduled public hearing and/or meeting. The applicant acknowledges that, in signing this application, all conditions and requirements inherent in the process have been fully explained and understood, including the timetable for processing the application. The completed application with all necessary documents and payments must be returned to the Planning office not later than 21 days before the 2nd or 4th Thursday of each month. Receipt of fee(s) does not constitute receipt of a completed application.

Ownership: I the undersigned due hereby agree to all the rules and regulations as set forth in the Long Beach Zoning Ordinance and also agree to pay all fees and charges as stated.

Name of Rightful Owner (PRINT)

Name of Agent (PRINT)

Owner's Mailing Address

Agent's Mailing Address

City State Zip

City State Zip

Phone

Phone

Email address

Email Address

Signature of Rightful Owner Date

Signature of Agent Date

OFFICE USE ONLY

Date Received _____ **Zoning** _____ **Agenda Date** _____ **Check Number** _____